



Wound Complications after Laparotomy for Endometrial Cancer

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Oral

Objective: To determine the incidence of wound complications after laparotomy for endometrial cancer and significant predictors of risks.

Methods: Medical records of patients with endometrial cancer undergoing laparotomy for surgical staging at Srinagarind hospital, Khon Kaen university between January 2007 and December 2013 were reviewed. Intravenous antibiotic prophylaxis was routinely given 30 minutes before operation. The primary endpoint was wound complications (including seroma, hematoma, separation, or infection) requiring additional medical and/or surgical management within 6 weeks of laparotomy.

Results: During the study period, 357 patients with complete medical records were reviewed. The mean age was 56.9 years. Wound complications were observed in

28 patients (7.84%, 95% CI, 5.27% to 11.14%). Body mass index (BMI) ≥ 30 kg/m², diabetes mellitus (DM), and prior abdominal surgery were observed as the significant independent factors predicting an increased risk of wound complications with an adjusted odds ratio (95% CI) of 2.96 (1.23-7.16), 2.43 (1.06-5.54), and 3.05 (1.03-8.98), respectively.

Conclusion: Incidence of wound complications after laparotomy for endometrial cancer was 7.8%. Significant independent predictors of risk included BMI, DM and prior of abdominal surgery.

Key words: wound complication, laparotomy, surgical staging, endometrial cancer, risk factors

